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APPLICANTS

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** CONTINUING DATA *****
 This application is a CON of 09/420,339 10/18/1999 PAT 6,280,398
 JF

** FOREIGN APPLICATIONS *****
 JF

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>JF</i> Initials	STATE OR COUNTRY CA	SHEETS DRAWING 13	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 3
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TITLE
 METHODS AND DEVICES FOR COLLECTION OF SOFT TISSUE

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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